

In re the Application of:

Hector F. DeLuca et al

Application No. 09/871,227

Filed: May 31, 2001

Group Art Unit: 1614

Examiner: Barbara P. Badio, Ph.D.

2-ETHYL AND 2-ETHYLIDENE-19-NOR-VITAMIN D COMPOUNDS

CERTIFICATE OF MAILING

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*Dorothy A. Hauser*

February 18, 2003

Dorothy A. Hauser

Date

AMENDMENT

Box: Amendment  
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Sir:

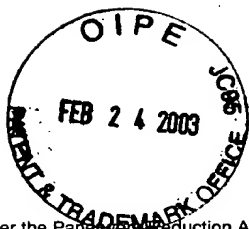
In response to the Patent Office Action dated November 18, 2002, please enter the following in the above-identified patent application:

REMARKS

In the Office Action dated November 18, 2002, claims 1-56 were examined with the result that all claims were rejected. In response, Applicant submits the following remarks. In view of these remarks, reconsideration of this application is requested.

In paragraphs 1-3 of the Office Action, the Examiner rejected claims 1-56 under the Doctrine of Obviousness Type Double Patenting. However, before dealing with the double patent rejections, Applicant would like to turn to paragraphs 4-6 of the Office Action where the Examiner rejected the claims under 35 USC §103(a).

Applicant will return to the double patenting rejections after discussing the obviousness rejections.



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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Applicati n Numb r	09/871,227
	Filing Date	May 31, 2001
	First Named Inventor	Hector F. DeLuca
	Group Art Unit	1614
	Examiner Name	Barbara P. Badio, Ph.D.
Total Number of Pages in This Submission	Attorney Docket Number	1256-00765

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>Return Receipt Postcard</b>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Thomas M. Wozny
Signature	<i>Thomas M. Wozny</i>
Date	02/18/2003

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